2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

DOCUMENT# N01000008794

Entity Name: RIDGE ASSOCIATION OF HEALTH UNDERWRITERS, INC.

Current Principal Place of Business:

225 E. LEMON ST
STE 351
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 622
HAINES CITY, FL 33845

New Mailing Address:

FEI Number: 59-3522626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WENDEL, JOHN F
WENDEL & CHRITTON, CHARTERED
5300 S. FLORIDA AVE.
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LUSTMAN, JOHN
Address: 380 SOUTHAMPTON BLVD
City-St-Zip: AUBURNDALE, FL 33823

Title: DS ( ) Delete
Name: CAIN, LUETTA H
Address: P.O. BOX 980
City-St-Zip: AUBURNDALE, FL 338233444

Title: T ( ) Delete
Name: DAVIS, BRUCE
Address: 7722 STARE RD STE 215
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WEAVER, DAVID
Address: POST OFFICE BOX 622
City-St-Zip: HAINES CITY, FL 33845

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE A. DAVIS T 02/10/2009

Electronic Signature of Signing Officer or Director — Date